Overview of the Army Substance Abuse Program (ASAP)

Program Authority

Public Law 92-129
28 Sep 1971

Established drug prevention and control programs in the Armed Forces.

DoD Directive 1010.1

9 Dec 1994 - Drug Abuse Testing Program.

DoD Instruction 1010.16

9 Dec 1994 - Technical Procedures for the Military Personnel Drug Abuse Testing

Army Regulation 600-85
15 Oct 2001

Army Substance Abuse Program (ASAP)*

*** Formally known as Alcohol and Drug Abuse Prevention Control Program (ADAPCP)**

OBJECTIVES

- List ASAP Principles & Services
- Commander’s Responsibilities
- Biochemical Testing Program
- Screening Outcomes
- Prevention and Education

ASAP Principle

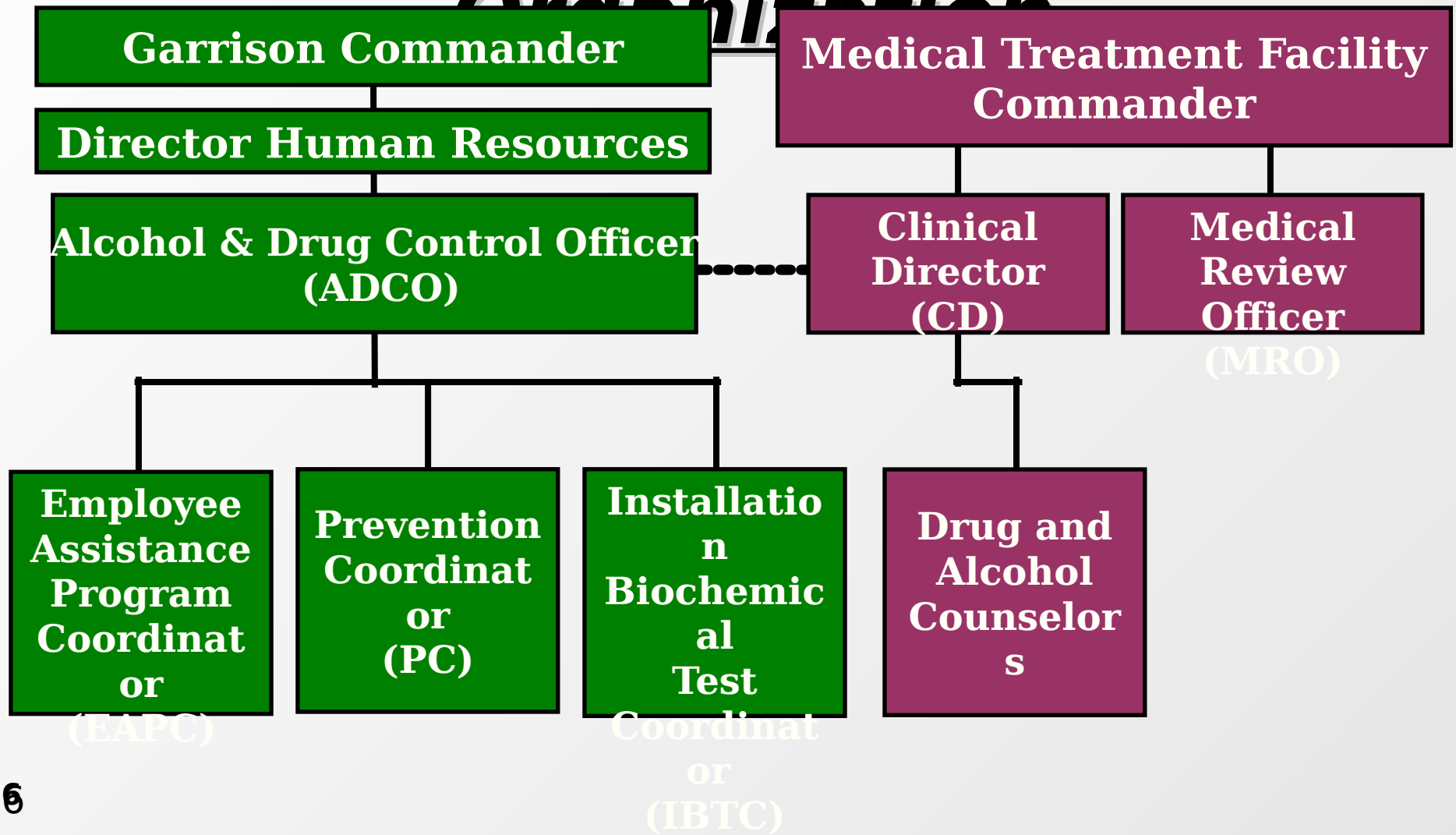
Abuse of alcohol or use of illicit drugs by both military and civilian personnel is inconsistent with Army values, standards of performance, discipline, and the readiness necessary to accomplish the Army's mission.

Guiding Principles

AR 600-85 1-31 states:

- **The Army Substance Abuse Program is a *command* program that emphasizes readiness and personal responsibility.**
- **The *command* role in prevention, biochemical testing, early identification, rehabilitation and administrative or judicial actions is essential.**
- ***Commanders* will ensure that all**

Army Substance Abuse Program Organization



Army Substance Abuse Program Staff

- **Alcohol and Drug Control Officer (ADCO) – The Garrison ASAP manager and the Commander's POC for all substance abuse issues.**
- **Prevention Coordinator (PC) – Conducts education and prevention efforts on the installation – Unit's main resource for education and training materials.**
- **Installation Biochemical Test Coordinator (IBTC) – The installation SME on drug testing issues.**
- **Employee Assistance Program Coordinator (EAPC) – POC for troubled civilian employees to receive counseling and referral services.**
- **Clinical Director (CD) – Clinical ASAP Manager**

ASAP Services

- **Garrison**
  - **Provide prevention education – Unit training, school programs, special events, etc.**
  - **Provide information - Campaigns, posters, pamphlets, etc.**
  - **Run the drug testing program**
  - **Train and certify UPLs**
  - **Civilian Employee Assistance Program**
  - **Run the Risk Reduction Program**

- **Clinical**
  - **Screen personnel for possible enrollment**
  - **Provide treatment services**
  - **Medical Review Officer (MRO) services from MTF (not ASAP) – The MRO determines if a positive specimen was positive due to legitimate medical use or illicit use**

Commander's Responsibilities

- **Implement a unit biochemical-testing program.**
- **Appoint an officer or NCO (E-5 or above) on orders as the UPL who must be certified through the garrison ASAP.**
- **Implement ASAP prevention and education initiatives – 4 hours/year.**
- **Ensure all newly assigned Soldiers are briefed on ASAP policies and services.**
- **Maintain liaison with ASAP clinical and non-clinical personnel.**
- **Maintain ASAP elements while deployed.**
- **Report all offenses involving illegal possession, use, sale, or trafficking in drugs or drug paraphernalia to the PMO. This includes all positive drug test results that do not require a MRO review.**
- **Work with the Risk Reduction Program (RRP) Coordinator in designing and effecting prevention and intervention approaches.**
- **Assess programs and provide feedback to the RRP Coordinator.**

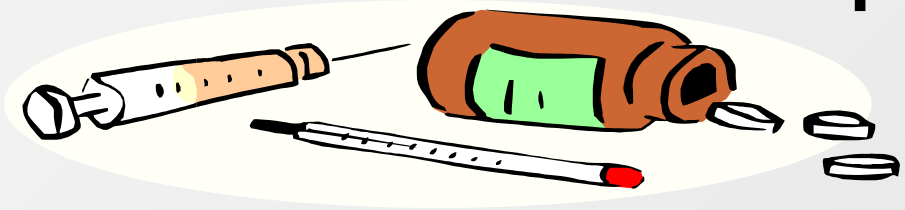
Implement a Biochemical Testing Program

- Appoint a primary and alternate certified UPL on orders
- Approve and sign the Unit Substance Abuse Program SOP
- Conduct unpredictable and unannounced random drug tests using the automated DoD Drug Testing Program (DTP)
- Conduct unpredictable and unannounced alcohol tests
- Set the example and show command support
- Take immediate actions on drug and alcohol incidents

Drug Use Policy

Soldiers identified as drug abusers – using illegal drugs, using someone else's prescribed drugs or abusing their own prescription. Regardless of rank or time in service, must be:

- **Referred for screening at the Clinical ASAP**
- **Considered for disciplinary action under UCMJ**
  - **Courts-Martial**
  - **Article 15**
- **Processed for administrative separation**



Alcohol

- **Testing - Commanders may test the unit or parts of the unit randomly for alcohol:**
  - **Blood Alcohol Content (BAC), based on breath test, of .05% is considered impaired on-duty**
  - **Test must be confirmed by MP breathalyzer or a Legal Blood Alcohol Test at the MTF.**
- **Commanders must deglamorize alcohol use; alcohol consumption should NOT be the main focus of any unit event.**
- **Enforce underage drinking violations – charge both the underage drinker and the Soldier that provided the alcohol.**

Alcohol Incident Policy

Alcohol related incidents:

- **Referred for screening at Clinical ASAP**
- **Considered for disciplinary action under UCMJ**
- **An administrative separation action will be processed for Soldiers involved in two serious incidents of alcohol related misconduct in a year**
- **Alcohol Related Incidents (Misconduct) include but are not limited too:**
  - **Impaired on duty**
  - **DWI/DUIs**
  - **Underage drinking**
  - **Providing alcohol to someone under 21**
  - **Negative incident involving alcohol – fighting, child or spouse abuse etc.**

Screening By Clinical ASAP

- **Possible outcomes:**
  - **No ASAP services required at this time: The Soldier does not have an alcohol problem and does not require further education.**
  - **Refer to Alcohol Drug Abuse Prevention Training (ADAPT) – 12 Hours of education intervention**
  - **Referral to another agency – Chaplain, marriage counselor, etc.**
  - **Enrollment in to ASAP Rehabilitation – The counselor will contact the commander to discuss treatment options.**

Prevention & Education

- **Newcomers Briefing**
- **Alcohol and Drug Awareness Training – 4 hours annually conducted primarily by:**
  - **UPLs**
  - **Commander/1SG**
  - **Prevention Coordinators (ASAP)**
- **Alcohol and Drug Abuse Prevention Training – 12 hours of education intervention**
- **Bulletin boards at the unit with posters, pamphlets, policies, etc.**
- **Annual campaigns conducted by the ASAP**
- **Unit Prevention Plan – part of your unit SOP**
- **Risk Reduction Program**

Summary

- **Drug and alcohol abuse is inconsistent with military service and negatively effects our Soldier's performance, productivity and readiness**
- **Drug test aggressively and take action against identified abusers – Deterrence not Detection**
- **Deglamorize alcohol abuse and hold Soldiers accountable for alcohol related incidents**
- **Educate Soldiers about the ASAP services and effects of drug and alcohol abuse**
- **Remember it's a commanders program – your Soldier's actions are a reflection of you in garrison or in combat"**